**NOTTINGHAMSHIRE & DISTRICT MINERS' PENSION SCHEME 1939**

**EXPRESSION OF WISH FORM**

Please complete this form to make known your wishes.

Please use block capitals and return to: Nottinghamshire & District Miners' Pension Scheme 1939, Berry Hill Lane, Mansfield, Notts. NG18 4JR.

|  |  |
| --- | --- |
| Your full name: |  |
| Scheme Reference No: |  |
| Home address: |  |
| Post code: |  |
| Date of birth: |  |
| National Insurance No: |  |

Declaration: I understand that the Trustees have the discretion to pay all or any part of any cash sum from the Scheme in the event of my death to any of my relatives or dependents. I declare that it is my wish that any such cash sum should be paid to the person(s) named below in the proportions shown. I understand that the Trustees are not bound by this declaration.

Nomination of Beneficiaries:

|  |  |  |
| --- | --- | --- |
| Full Name & Address | Relationship to Member | % Proportion |
|  |  |  |
| Full Name & Address | Relationship to Member | % Proportion |
|  |  |  |
| Full Name & Address | Relationship to Member | % Proportion |
|  |  |  |
| Full Name & Address | Relationship to Member | % Proportion |
|  |  |  |

I understand that I can cancel or vary this declaration setting out my wishes at any time by completing a new Expression of Wish form.

Your signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_